STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services
Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

Institutions for Mental Diseases, for Persons Age 65 or Older: Services for Institutionalized Persons Age 65 or Older:

14(b) Skilled Nursing Facility Services:

Not Provided.

92-19-MA (NJ)

TN 92-19A Approval Date JUN 23 1931

Supersedes TN NOVE Effective Date MOV 25 1931

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services Provided to Medically Needy Groups PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

Institutions for Mental Diseases, for Persons Age 65 or Older: Services for Institutionalized Persons Age 65 or Older:

14(c) Intermediate Care Facility Services:

Not Provided.

92-19-MA (NJ)

TN 92-19A Approval Date JUN 2 9 1992
Supersodes TN New Effective Date MOV 2 9 1991

Addendum to Attachment 3.1-B Page 15(a)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services
Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

15(a) Intermediate Care Facility Services:

Not Provided.

92-19-MA (NJ)

TN 92-1	9 A	Annroval nata	UIN & 2 2000
Supersados	731	Approval Date_	JUN 2 9 1992
- 2 Cd62	1 14	Approval Date_ Effective Date	NOV 2 9 1531

Addendum to Attachment 3.1-B Page 15(b)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services

Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

15(b) Intermediate Care Facility/Mental Retardation:

Not Provided.

92-19-MA (NJ)

TN 92-1		_Approval	n a+a ³⁰	N 2 3	m)
Supersedes	TN New	_Approvat _Effective	Date Date	NOV 2	3 (49

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services
Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

Inpatient Psychiatric Facility Services, Persons Under Age 22:

Not Provided.

92-19-MA (NJ)

TN 92-1	9 A	_Approval	•	JUN 2 9	
Supersedes	TN New	Effective	Date	NOV 29	199



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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services Provided to Medically Needy Groups PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

17 Nurse-Midwife Services:

A nurse performing nurse-midwifery services must be a certified nurse midwife, (C.N.M.), which means a registered professional nurse licensed in New Jersey who receives certification by the American College of Nurse Midwives. A C.N.M. shall be licensed by and registered with the N.J. Board of Medical Examiners.

Coverage is limited to in-State providers.

Services rendered by a C.N.M. are limited to the maternity cycle as defined in the federal statutes.

Medical services, medical procedures or prescription drugs whose use is to promote or enhance fertility are not a covered service.

HealthStart services are limited to pregnant women.

Nurse-midwife services are available to all three coverage groups (pregnant women, dependent children, and the aged, blind or disabled).

94-18-MA (NJ)

TN 94-18 Approval Date OCT 24 1994
Supersedes TN 92-19A Effective Date JUL 25 1994

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services
Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

17. Hospice Services

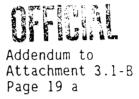
Hospice services are not provided under the Medically Needy Program.

TN9	2-24	Approval	Date	NDV 1	2 1992
		V Effective			



92-24-MA (NJ)





STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services Provided to Medically Needy Groups PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

19 a Case Management Services:

This service is available only to pregnant women, although they may be eligible as dependent children, as blind and/or as disabled.

Clinical case management services, except for the initial evaluation services, must be prior authorized by the Division of Mental Health and Hospitals.

Liaison case management services are limited to sixty days postdischarge from a hospital or inpatient psychiatric program.

94-26-MA (NJ)

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services Provided to Medically Needy Groups PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

Extended services to pregnant women:

- The following pregnancy related and post-partum services are also provided to pregnant women:
 - 1. Inpatient hospital services (other than those provided in an institution for mental diseases).
 - 2. Outpatient hospital services.
 - 3. Other laboratory and X-ray services.
 - 4.c Family Planning
 - 5. Physicians' services (regardless of location).
 - 7. Home Health services.
 - 9. Clinic services.
 - 12. Prescribed drugs.
 - 17. Nurse-Midwife services.

Any limitations on the required services in section 20(a) which are currently described in the addendum to Attachment 3.1-A are applicable to pregnant women.

92-19-MA (NJ)

TN 92-19A Approval Date Jun 29 1982
Supersedes TN 91-1 Effective Date MOV 29 1991

Addendum to Attachment 3.1-B Page 20(b)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Limitations on Amount, Duration and Scope of Services Provided to Medically Needy Groups PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR DISABLED

Extended services to pregnant women:

- 20(b) Services for any other medical conditions that may complicate pregnancy:
 - 4. Nursing Facility services (other than those in an institution for mental diseases) for individuals 21 years of age or older.
 - Medical care and any other type of remedial care recognized under state law (by licensed practitioners, including podiatrists' services, chiropracters' services, and other practitioners' services).
 - 9. Clinic services.
 - 10. Dental services.
 - 11. Physical therapy and related services, including occupational therapy, and services for individuals with speech, hearing and language disorders.
 - 12. Dentures, prosthetic devices, eyeglasses.
 - 13. Other diagnostic, screening, preventive, and rehabilitative services.
 - 20. Any other medical care and any other type of remedial care recognized under state law, specified by the Secretary (includes transportation and personal care services).

Any limitations on services in section 20(b) which are currently described in the addendum to Attachment 3.1-A are applicable to pregnant women.

92-19-MA (NJ)

TN 92-19A Approval Date JUN 2 9 1992
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